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no persons are required to respond to a collection of information unless it displays a valid OMB control number. Under the Paperwork Reduction Act of 09/844,533 **CHANGE OF** Application Number **CORRESPONDENCE ADDRESS** Filed April 27, 2001 Application First Named Tatsuhito Address to: Inventor TAKAHASHI **Commissioner for Patents** P.O. Box 1450 Group Art Unit 1755 Alexandria, VA 22313-1450 **Examiner Name** Paul D. Marcantoni Attorney Docket Number 01254C/HG Please change the Correspondence Address for the above-identified application to: [X] Customer Number [01933] Type Customer Number here OR [] Firm or Individual Name Address Address ZIP City State Country Telephone Fax This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124). I am the: [] Applicant/Inventor. [] Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). [X] Attorney or Agent of record. [] Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number __28,180 Typed or Printed RICHARD S. BARTH - REG NO. 28,180 Name Signature March 10, 2004 Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.

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